

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

John Bolton Super PAC

ADDRESS (number and street)

1730 M Street NW

Suite 611

Washington

DC

20036

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00542464

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the State of

ZZ

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hobbs, Cabell, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Hobbs, Cabell, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

John Bolton Super PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2022

To:

M M	/	D D	/	Y Y Y Y Y
11		28		2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2022</td></tr></table>	Y	Y	Y	Y	Y	2022						<table><tr><td colspan="5">1072659.28</td></tr></table>	1072659.28				
Y	Y	Y	Y	Y													
2022																	
1072659.28																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">1032373.59</td></tr></table>	1032373.59															
1032373.59																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">252080.40</td></tr></table>	252080.40					<table><tr><td colspan="5">1452752.16</td></tr></table>	1452752.16									
252080.40																	
1452752.16																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">1284453.99</td></tr></table>	1284453.99					<table><tr><td colspan="5">2525411.44</td></tr></table>	2525411.44									
1284453.99																	
2525411.44																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">113375.99</td></tr></table>	113375.99					<table><tr><td colspan="5">1354333.44</td></tr></table>	1354333.44									
113375.99																	
1354333.44																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">1171078.00</td></tr></table>	1171078.00					<table><tr><td colspan="5">1171078.00</td></tr></table>	1171078.00									
1171078.00																	
1171078.00																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

John Bolton Super PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	2	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	252000.00	1449948.02
(ii) Unitemized	25.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	252025.00	1449973.02
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	252025.00	1449973.02
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	2697.24
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	55.40	81.90
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	252080.40	1452752.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	252080.40	1452752.16

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	113375.99	854333.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	113375.99	854333.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	500000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	113375.99	1354333.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	113375.99	1354333.44

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	252025.00	1449973.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	252025.00	1449973.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	113375.99	854333.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2697.24
38. Net Operating Expenditures (subtract Line 37 from Line 36)	113375.99	851636.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
John Bolton Super PAC

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KEPNER, SCOTT, D., ,</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 10 / 03 / 2022 Transaction ID : SA.512556</p>		
<p>Mailing Address 449 WHISKEY HILL</p>			<p>Amount of Each Receipt this Period 5000.00</p>		
<p>City WOODSIDE</p>	<p>State CA</p>	<p>Zip Code 94062</p>	<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p>Aggregate Year-to-Date ▼ 5000.00</p>		
<p>Name of Employer (for Individual) VILLAGE PROPERTIES</p>		<p>Occupation (for Individual) PARTNER</p>	<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GIOIA, ANTHONY, H., HON,</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 10 / 07 / 2022 Transaction ID : SA11A.219157</p>		
<p>Mailing Address 925 DELAWARE AVENUE APT 7D</p>			<p>Amount of Each Receipt this Period 5000.00</p>		
<p>City BUFFALO</p>	<p>State NY</p>	<p>Zip Code 14209-1868</p>	<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p>Aggregate Year-to-Date ▼ 25000.00</p>		
<p>Name of Employer (for Individual) GIOIA MANAGEMENT</p>		<p>Occupation (for Individual) EXECUTIVE</p>	<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CANNING, JOHN , A., MR. , JR.</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2022 Transaction ID : SA11A.219159</p>		
<p>Mailing Address 1650 DUBLIN COURT</p>			<p>Amount of Each Receipt this Period 25000.00</p>		
<p>City INVERNESS</p>	<p>State IL</p>	<p>Zip Code 60067-4726</p>	<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p>Aggregate Year-to-Date ▼ 25000.00</p>		
<p>Name of Employer (for Individual) MADISON DEARBORN PARTNERS, INC</p>		<p>Occupation (for Individual) CHAIRMAN</p>	<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>35000.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>					

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRATT, IRIT, , MRS.,

Mailing Address 6 CREST LANE

City
SCARSDALEState
NYZip Code
10583-7504FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2022

Transaction ID : SA11A.219158

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHOSTAK, ROBERT, , MR.,

Mailing Address 17800 LAUREL PARK DRIVE
SUITE 200City
LIVONIAState
MIZip Code
48152-3985FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SCHOSTAK BROS.Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2022

Transaction ID : SA11A.219160

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROCK, JOHN, A., MR.,

Mailing Address 1228 E. 25TH STREET

City
TULSAState
OKZip Code
74114-2616FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKFORD EXPLORATIONOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2022

Transaction ID : SA11A.219162

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLORY, DAVID, L., MR.,

Mailing Address 50 S. POINTE DRIVE
APT 2008

City
MIAMI BEACH

State
FL

Zip Code
33139-4787

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINCAPITOL

Occupation (for Individual)
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2022

Transaction ID : SA11A.219163

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCINERNEY, THOMAS, E., MR.,

Mailing Address 2 MANITOU COURT

City
WESTPORT

State
CT

Zip Code
06880-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BLUFF POINT ASSOC.

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2022

Transaction ID : SA11A.219165

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DROR, BRIAN, , MR.,

Mailing Address 2213 VINA DEL MAR

City
OXNARD

State
CA

Zip Code
93035-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RCB EQUITIES

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2022

Transaction ID : SA11A.219168

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

85000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 21
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
John Bolton Super PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TONKEL, J, ROCK, MR., JR

Mailing Address **6862 ELM STREET**

City
MCLEAN

State
VA

Zip Code
22101-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARLINGTON ASSET INVESTMENT

Occupation (for Individual)
PRES AND CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 25 / 2022

Transaction ID : SA11A.219166

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEBBANE, RAYMOND, , MR.,

Mailing Address **10 QUAIL ROAD**

City
GREENWICH

State
CT

Zip Code
06831-3369

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE INVUS GROUP

Occupation (for Individual)
PRESIDENT / CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

10 / 27 / 2022

Transaction ID : SA11A.219170

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STANTON, JAMES , M., MR.,

Mailing Address **6125 LUTHER LANE
NO 250**

City
DALLAS

State
TX

Zip Code
75225-6202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANTON LLP

Occupation (for Individual)
FOUNDER AND ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 27 / 2022

Transaction ID : SA11A.219174

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, ROBERT, W., MR.,

Mailing Address 15 HEATHERWOOD DRIVE

City
MADISONState
CTZip Code
06443-1840FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEBRODI PARTNERSOccupation (for Individual)
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2022

Transaction ID : SA11A.219178

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RECORDS, GEORGE, J., MR.,

Mailing Address P.O. BOX 54390

City
OKLAHOMA CITYState
OKZip Code
73154-1390FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2022

Transaction ID : SA11A.219177

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105000.00

TOTAL This Period (last page this line number only)..... ►

252000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	3			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.236774

Amount of Each Disbursement this Period

4166.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVENUE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.2

Amount of Each Disbursement this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FLAVIN, KATHLEEN, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	7			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB19238

Amount of Each Disbursement this Period

2309.18

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6560.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2022

FEC Identification Number

C**Transaction ID : SB1823**

Amount of Each Disbursement this Period

3410.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2022

FEC Identification Number

C**Transaction ID : SB12544**

Amount of Each Disbursement this Period

4389.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 6402 ARLINGTON BLVD

City
FALLS CHURCHState
VAZip Code
22042Purpose of Disbursement
PAYROLL TAXES / PAYROLL SERVICES

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2022

FEC Identification Number

C**Transaction ID : SB.4**

Amount of Each Disbursement this Period

6389.47

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14189.47

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2022

Mailing Address 1593 SPRING HILL ROAD, STE. 400

City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.7

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONNELL DONATELLI INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2022

Mailing Address PO BOX 1877

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
DIGITAL ADVERTISING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.8

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HOLLOWAY CONSULTING, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2022

Mailing Address 1530 WILSON BLVD STE 440

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.6

Amount of Each Disbursement this Period

12750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

16750.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. MCGRIFF INSURANCE SERVICES

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		07		2022

Mailing Address PO BOX 890635

City
CHARLOTTEState
NCZip Code
28289Purpose of Disbursement
INSURANCE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.5

Amount of Each Disbursement this Period

5100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FLAVIN, KATHLEEN, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		21		2022

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : SB0247

Amount of Each Disbursement this Period

2309.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SAMUELIAN, CHRISTINE, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		21		2022

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB95951

Amount of Each Disbursement this Period

3410.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10819.61

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2022

FEC Identification Number

C**Transaction ID : SB35786**

Amount of Each Disbursement this Period

4389.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 6402 ARLINGTON BLVD

City
FALLS CHURCHState
VAZip Code
22042Purpose of Disbursement
PAYROLL TAXES / PAYROLL SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2022

FEC Identification Number

C**Transaction ID : SB.15**

Amount of Each Disbursement this Period

6379.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1920 MCKINNEY AVE 7TH FLOOR

City
DALLASState
TXZip Code
75201Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2022

FEC Identification Number

C**Transaction ID : SB.17**

Amount of Each Disbursement this Period

762.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11531.55

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CESC 1730 M STREET LLC

Mailing Address C/O VORNADO/CHARLES E. SMITH LPPO

City
PITTSBURGHState
PAZip Code
15264Purpose of Disbursement
RENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2022

FEC Identification Number

C

Transaction ID : SB.19

Amount of Each Disbursement this Period

8549.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1920 MCKINNEY AVE 7TH FLOOR

City
DALLASState
TXZip Code
75201Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2022

FEC Identification Number

C

Transaction ID : SB.22

Amount of Each Disbursement this Period

229.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH STREET

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2022

FEC Identification Number

C

Transaction ID : SB.24

Amount of Each Disbursement this Period

1417.35

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10196.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING LLC

Mailing Address PO BOX 365

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2022			

FEC Identification Number

C

Transaction ID : SB.23

Amount of Each Disbursement this Period

4166.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FLAVIN, KATHLEEN, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2022			

FEC Identification Number

C

Transaction ID : SB3724

Amount of Each Disbursement this Period

2349.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2022			

FEC Identification Number

C

Transaction ID : SB1803

Amount of Each Disbursement this Period

3610.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10126.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. TINSLEY, SARAH, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2022

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB88227

Amount of Each Disbursement this Period

4520.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2022

Mailing Address 6402 ARLINGTON BLVD

City
FALLS CHURCHState
VAZip Code
22042Purpose of Disbursement
PAYROLL TAXES / PAYROLL SERVICES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.26

Amount of Each Disbursement this Period

5653.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2022

Mailing Address 2700 COAST AVENUE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.28

Amount of Each Disbursement this Period

85.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10259.29

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. CONNELL DONATELLI INC

Mailing Address PO BOX 1877

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
DIGITAL ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2022			

FEC Identification Number

C**Transaction ID : SB.31**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HOLLOWAY CONSULTING, INC.

Mailing Address 1530 WILSON BLVD STE 440

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
FUNDRAISING CONSULTING & EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2022			

FEC Identification Number

C**Transaction ID : SB.30**

Amount of Each Disbursement this Period

2970.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FLAVIN, KATHLEEN, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2022			

FEC Identification Number

C**Transaction ID : SB02784**

Amount of Each Disbursement this Period

2347.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8818.65

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. SAMUELIAN, CHRISTINE, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2022			

FEC Identification Number

C**Transaction ID : SB66645**

Amount of Each Disbursement this Period

3610.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TINSLEY, SARAH, , ,

Mailing Address 1730 M STREET NW STE 611

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2022			

FEC Identification Number

C**Transaction ID : SB28640**

Amount of Each Disbursement this Period

4589.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 6402 ARLINGTON BLVD

City
FALLS CHURCHState
VAZip Code
22042Purpose of Disbursement
PAYROLL TAXES / PAYROLL SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2022			

FEC Identification Number

C**Transaction ID : SB.33**

Amount of Each Disbursement this Period

5510.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13710.58

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

John Bolton Super PAC

Full Name (Last, First, Middle Initial)

A. TRUIST - VISA

Mailing Address PO BOX 580340

City
CHARLOTTEState
NCZip Code
28258Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		18		2022

FEC Identification Number

C

Transaction ID : SB.35

Amount of Each Disbursement this Period

374.17

NO ITEMIZATION REQUIRED

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

374.17

113337.85